

WAIVER OF SEPARATION DISTANCE

Cuming County Planning & Zoning Department
200 S Lincoln, Room 202, West Point, NE 68788
Phone 402-372-6008 FAX 402-372-6013

Livestock Property Owner(s): _____

Address: _____

Parcel #: _____ Acres: _____

Legal Description: _____

Residential Property Owner(s): _____

Address: _____

Parcel#: _____ Acres: _____

Legal Description: _____

Reason for Waiver: _____

Zoning District: _____

LFO Level: _____ Animal Units: _____

Distance required between residence and LFO or LFO and residence: _____

Distance requested through Waiver: _____ feet which is _____ feet less than the required _____

I (We) the owner(s) of the property located at _____

do hereby give consent to _____

to locate / expand (circle one) a Livestock Feeding Operation / Residence (circle one) on the property located at _____

at a distance of _____ feet which is _____ feet less than the _____ feet required by the Cuming County Zoning Regulations.

Residential Property Owner / LFO Property Owner (circle one) waives the separation distance requirement set out in the Cuming County Zoning Regulations and consents to the use of the LFO continuing, constructing or expanding / Residential use (circle one) of land as indicated above.

RESIDENTIAL PROPERTY OWNER: *All Owners must sign*

Please use blue ink

_____ (Print Name) _____ Date

_____ (Title, if any)

If Owner is a Corporation or LLC, please include title.

Spouse, if any _____ (Print Name) _____ Date

STATE OF NEBRASKA)
) ss.
COUNTY OF _____)

The foregoing Waiver was executed and acknowledged before me on the _____ day of _____, 20____ by _____ as their voluntary act and deed.

Notary Public

My commission expires _____.

LFO (LIVESTOCK) PROPERTY OWNER: *All Owners must sign*

Please use blue ink

_____ (Print Name) _____ Date

_____ (Title, if any)

If Owner is a Corporation or LLC, please include title.

Spouse, if any _____ (Print Name) _____ Date

STATE OF NEBRASKA)
) ss.
COUNTY OF _____)

The foregoing Waiver was executed and acknowledged before me on the _____ day of _____, 20____ by _____ as their voluntary act and deed.

Notary Public

My commission expires _____.